

# BINGHAMTON PSYCHIATRIC CENTER



1881 - 1981





State of New York  
Hugh L. Carey, Governor

Office of Mental Health  
James A. Prevost, M.D., Commissioner

Regional Director  
John Collier

BINGHAMTON PSYCHIATRIC CENTER  
Louis Dozoretz, M.D., Director

George Primanis, M.D.  
Deputy Director, Clinical

William Connor, PhD  
Director for Quality Assurance

William S. Lacey  
Deputy Director for Institution Administration

David O'Neil  
Director for Community Services

BOARD OF VISITORS

William Burns, President  
Genevieve George  
Carl Gitlitz  
Robert Austin  
Howard Berkowitz  
Jacqueline Shrader

Written and edited by Gail K. Goldberg, Supervisor of Volunteer Service, with research assistance by Nancy L. Helmer, Assistant Librarian.



## *Foreword*

This condensed history of the Binghamton Psychiatric Center represents a chronology of an institution which for one hundred years has been a major resource for the rehabilitation of the mentally ill in the community of the Southern Tier and Central New York State.

Devoted to the restitution of the body and of the spirit of man, thousands of dedicated individuals who have constituted the heart of this facility, limited only by the current levels of evolution of the arts and sciences and by the willingness of the broader society to assume a moral responsibility for the sick, have established this hospital as a haven and refuge, a source of alleviation of the pain of emotional conflict and for restoration of psycho-physiological equilibrium.

A greater understanding of mental illness on the part of the general public gradually has transformed the climate of fear and prejudice which dominated the establishment of the first psychiatric hospitals on the fringes of urban centers. Significant advances and achievements in psychiatry and the development of more enlightened philosophies of treatment today offer more hope to the sick and to the families whose lives are so often adversely touched.

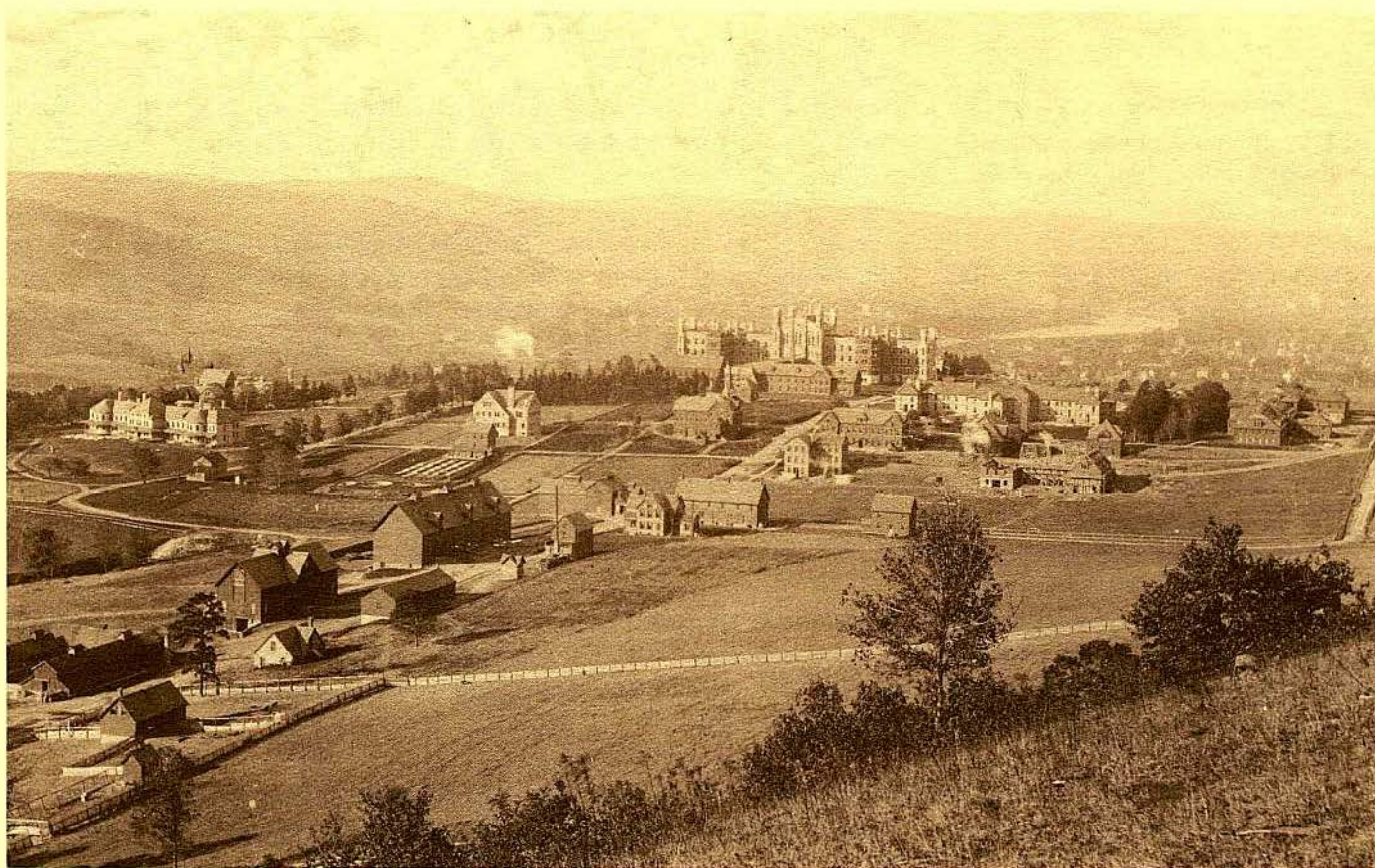
The decline of mammoth isolated institutions, the reduction of hospital populations, and an emphasis upon early recognition and successful treatment have accompanied the dramatic improvements which have been generated within the therapeutic environment of the modern psychiatric hospital now becoming a nuclear element of an integrated complex of community mental health services.

We look forward to another century of service to our fellow citizens, offering programs for effective and compassionate psychiatric care and treatment, the future ever illuminated by the memory of the devotion, and selfless contributions of those who have preceded us in a great cause.

September 3, 1981

LOUIS DOZORETZ, M.D.  
Director





*Binghamton State Hospital – 1894*



# *History of Binghamton Psychiatric Center*

The Binghamton Psychiatric Center came into existence as the successor to the world's First Inebriate Asylum. The history of the hospital must be briefly told to establish the chain of events by which the State interest developed into final ownership.

In 1854, Doctor Joseph Edward Turner petitioned the State Legislature for a charter to establish an asylum for inebriates. Chapter 243 of the Laws of 1854 constituted "An Act to Incorporate the United States Inebriate Asylum for the Reformation of the Poor and Destitute Inebriate." The name chosen by Dr. Turner for the asylum indicated the scope and splendor of his dreams. Three years later, the name was changed to the New York State Inebriate Asylum. The asylum was to be financed by public subscription and donations. Each \$10 share of stock would enable stockholders a vote in managing the institution. Dr. Turner also appealed to the State for 10% of the excise tax on alcoholic beverages on the logical grounds that a fraction of the public income from liquor should be devoted to the rehabilitation of the victims. That year, the institution received \$17,000.

In 1858, the City of Binghamton offered as a site for the proposed institution "two hundred fifty-two acres of the most valuable and beautiful land within its limits," valued, according to Dr. Turner's report, at \$13,666.66. Issac G. Perry, later State Architect and one of the designers of the Capitol at Albany, was engaged to draw the plans. He was associated with the Asylum, and its successor, for more than 30 years designing many of the important additions. The style chosen for the building was Castellated Gothic, "combining prominence with grandeur and beauty. The structure is three hundred and sixty-five feet in length, three stories high with massive towers, turrets and buttresses embattled at the top." The cornerstone was laid with elaborate Masonic ceremonies on September 24, 1858 on the hill two miles east of Binghamton overlooking the Susquehanna River. "Great expectations were entertained of the good to be done by the asylum. But it came to grief. Too many inebriates did not care to reform, the management was inharmonious and two attempts to burn the building partially succeeded." After 20 years, the asylum closed and was turned over to the State for the price of \$1.00. The sale was followed by court battles that lasted several years. In May of 1879, the State Legislature passed, "An act to abolish the New York State Inebriate Asylum and to establish the Binghamton Asylum for the Chronic Insane and to provide for the management thereof." A thorough examination of the premises showed that extensive repairs were necessary and Issac G. Perry was re-engaged to complete the work he had begun. The Asylum was remodeled and on October 19, 1881 was reopened for patients. During the next ten years, the State added buildings and improved the existing structure.

Under Dr. Theodore S. Armstrong of Owego, patients entering for care had a variety of work projects. Farming was carried on as farm properties adjacent to the Asylum were acquired. Raising of crops and livestock routinely supplied foodstuff for patients and staff. Patient labor was also employed in excavation, laying pipe, building roads, etc. Various trade skills were taught to patients which added to the self-sufficiency of the institution. During this time, Dr. Armstrong succeeded in organizing "a string orchestra and coronet band" which furnished music for concerts and dancing. "His policy was based on kind treatment, occupation and as much liberty as was consistent with safety."

In 1890, the name of the institution was again changed when the State was divided into hospital districts, each composed of a certain number of counties. The State Care Act transformed it into the Binghamton State Hospital. Its character was radically altered by the requirement to receive and treat not only chronic but recent and curable cases as well.

During the next 30 years, under the skilled direction of Dr. Charles Gray Wagner, appointed in 1892, the transformation of the Binghamton Insane Asylum into a State Hospital was completed. "He retained everything of value or of promise that Dr. Armstrong had introduced while extending gains in all directions."

During his reign straitjackets and other restraining devices were removed and new medical techniques and expanded services were added. He instituted the "open door" policy allowing patients to go out of doors to enjoy the air and sunshine. Specialized care for eye problems, the use of hydrotherapy, the addition of medical interns and increased recreation facilities were among other improvements added. A nursing school was established when Dr. Wagner came to Binghamton, but it wasn't until 1910 that a new nurses' home, Ferris Hall, was opened. Other buildings built in the early 1900's were the 100 bed Tuberculosis pavilion (1908), Pine Camp (1909), the Broadmoor Building (1908) and Wagner Hall (1915) for female patients. A unique feature was the "tent colony" called Pine Camp which allowed patients by the day or week to camp out. Social work and an out-patient clinic in Binghamton were underway by 1916. The shortage of employees and medical staff during World War I seriously impaired the routine of the institution, and the famous 1918 influenza epidemic was a major hardship for an understaffed hospital.

Dr. Wagner's progressive reign ended in 1923 with his death. He was succeeded by Dr. William C. Garvin, after whom the Garvin Building later was named.





*Staff - 1890's*



By this time, the hospital had grown from 300 patients when it opened in 1881 to 2900 patients and 500 employees in 1924. Dr. Garvin led the institution through the Depression when State funds were scarce. Much of the concern during these years was in maintaining the existing buildings and deciding where to put an increasing number of patients. By 1940, the hospital was badly overcrowded. 3000 patients were crowded in buildings that had a total bed capacity for 1700. On the other hand, the nurses' training school became affiliated with Binghamton General, Wilson and Elmira Hospitals with third year students referred for three months psychiatric training to Binghamton State Hospital. By 1947, it became the largest school of nursing in a New York State Institution.

Trends that would continue for patient care included five mental hygiene clinics locally, 248 patients on parole (selected patients placed in private homes) and 64 patients boarded out.

When Dr. Hugh S. Gregory took over in 1942, the hospital was facing staff shortages brought on by World War II. Admissions were increasing and Dr. Gregory expanded the parole system initiated by Dr. Garvin. He also began extensive use of shock treatments and insulin. However, it wasn't until the post war years that the hospital could see relief coming. Medical services were expanded with the introduction of chemotherapy and the use of prefrontal lobotomy for the treatment of those cases who were resistant to other forms of treatment.

Dr. Gregory's ten years at Binghamton were not without excitement. In January 1952, he and another hospital official were shot and wounded by a former employee while meeting in a hospital conference room.

Dr. Arthur Rodgers succeeded Dr. Gregory in December 1952. The opening of the Garvin Building in 1953 added 765 beds, bringing the hospital's total capacity to 2500 beds. An increasing number of elderly patients were being admitted and a Children's Unit was started for boys in the Fairmont Building. In addition to drug and shock therapies, some patients were also participating in group therapy programs.

In 1957, Dr. Rodgers transferred to the Syracuse State School and was succeeded by Dr. Ulysses Schutzer. It was under his directorship that a new "open door" policy was implemented, brought about by the increasing use of tranquilizing drugs and out-patient clinics. A more active approach to rehabilitation added job related skills to Occupational Therapy classes.

A new Volunteer Service Program became increasingly active. The development of this Volunteer Program demonstrated community acceptance of the hospital, its patients and its programs as the wider use of psychopharmacology allowed volunteers to be placed on all services of the hospital. The open door policy continued to be successful and the increased responsibility given to and accepted by the patients gave them a new and constructive outlook toward the hospital and its rehabilitation and treatment efforts. The patients' appearance improved as they became more aware of the people of the community. With increased patient freedom, new programs were developed to encourage patients to make better use of their leisure time and to develop skills to improve their work situations.

Because of shorter patient stays, it was increasingly difficult for the farms to obtain enough patient help. Eighty-eight years of farming came to an end when it was found that the food and crops could be purchased more cheaply than it cost to raise them.

Dr. Paul Schneider succeeded Dr. Schutzer in 1963. The treatment of patients focused on understanding the problems that caused their hospitalization. The overall objectives of treatment were directed toward helping the individual patient to understand his problems, the treatment of them and the Rehabilitation of the patient so that he could return to the community and adjust satisfactorily.

Since the appointment of Dr. Louis Dozoretz as Director in 1965, tranquilizers and rehabilitative programs have had a significant effect on reducing the length of hospital stay. Although admissions to the facility increased, a high percentage of discharges helped to reduce the overall population. Some of the programs which have contributed to the decreasing population are the intensive retreatment programs, reality orientation and remotivation programs for long-term patients which stress daily living activities; the intensive screening of geriatric admissions by the newly organized Geriatric Mobile Unit and the opening of the Day Center as an out-patient clinic and day hospital in 1969.

While some of the older buildings were closed and later demolished, renovations were made to Broadmoor and Wagner Hall, and the cornerstone of the new Rehabilitation Center was laid in ceremonies on September 23, 1969.

A new philosophy of treatment for the mentally ill, one of individualized and intensified therapy was instituted with the opening of the Rehabilitation Building. Rehabilitation programs were designed to offer patients a variety of recreational and leisure time activities, avocational programs to help patients return to their communities and vocational experiences in a variety of Work-for-Pay programs to assist patients in returning to the world of work.

The emerging image of the institution was seen not only as a special rehabilitation center for psychiatric patients, but as a health center similar to other community institutions. In keeping with this new image, the name was changed to Binghamton Psychiatric Center. The Center historically has received full accreditation from the Joint Commission on Accreditation of Hospitals. The receipt of this accreditation status indicates high quality patient care programs and services.





*Edgewood – A Ward for Tuberculosis Cases*



The early 1970's brought an increased outreach to the local communities and outlying counties to provide a greater depth of service and sharing of staff with mental health agencies. At the same time, elevated standards for accreditation by J.C.A.H. were increasing at a faster rate than the ability to keep pace with the physical improvements and space allocations. Special funding was granted for humanization projects to assure more privacy for patients.

Although the population had been cut in half since 1965, the phasing out of obsolete buildings and the creation of more favorable apartment-like private living accommodations for patients had in effect reduced the bed capacity of the institution. As a result, the high admission rate produced overcrowding.

The mid 1970's saw the closing of the Alcoholic Rehabilitation Unit. The Residency Program in Psychiatry was withdrawn, Fairmont and Wagner Hall closed and patients reorganized according to function rather than geographic location. However, three new units of service were added: Intensive Treatment Unit for maximum security and intensive treatment, Transitional Living Unit, Hecox Hall, a Quarterway House for patients re-entering the community, and the Out of Hospital Care Unit providing care and treatment of all Family Care and out-patients in the counties.

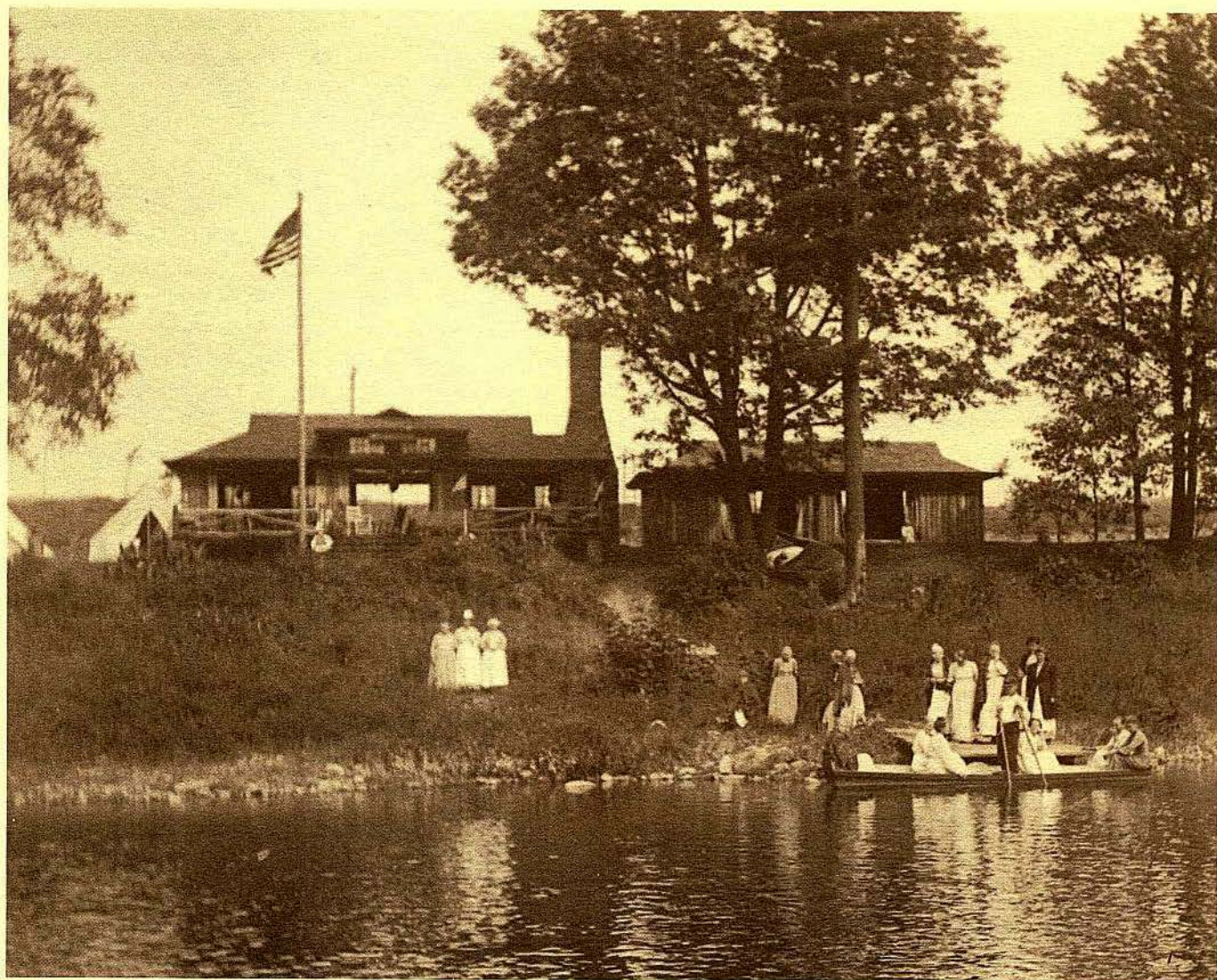
1978—The year of major reorganization within the State saw the development of the State's Five Year Plan. The deinstitutionalization movement that began as a national program in the 1960's was based on the rights of patients to be treated in the least restrictive environment. For the past several years, the Center has been working with public and private groups to provide a variety of residential and support programs to help former mental patients succeed in their return to normal lives in the community. Several components of service of the Community Support System include vocational opportunities, competency training, coping skills, community residences and case management. In all community services, the goal is to help patients achieve independence to whatever degree possible.

In 1979, the Board of Visitors voiced their concern about the possible premature release of patients into the community before community resources were available to receive them. Dr. Dozoretz assured the Board that clinical judgment and not quotas would prevail in judging the discharge of each patient. Dr. James A. Prevost, Commissioner of the Office of Mental Health reaffirmed this stating, "Our objectives are to provide effective and high quality intensive treatment for patients admitted to our institution and to plan adequately to allow for appropriate discharge, continued care and supportive treatment within the community."

For 100 years, the Binghamton Psychiatric Center has been caring for the mentally ill of Central New York. For 100 years, improvements have been made in the quality of that care. Doctors now know more about mental illness than ever before. While treatment is becoming increasingly effective, the future will pose many new and complex challenges for us. Moving into this second century of service, we at Binghamton Psychiatric Center look forward to meeting the challenge of providing the best care and treatment for our patients.

The primary source of material is taken from the Annual Reports of the Board of Visitors to the Department of Mental Health.





*Pine Camp – 1909*



# Chronological History of Binghamton Psychiatric Center

## Psychiatry and Their Place in the Country and the World

- 1841 Dorothea Dix started campaign for humane treatment of the mentally ill.
- 1844 Association of Medical Superintendents of American Institutions for the Insane formed in Philadelphia. Evolved in 1921 into American Psychiatric Association.  
The American Journal of Insanity was published by Amariah Brigham at the Lunatic Asylum at Utica. First periodical in English devoted exclusively to the treatment of mental disorders. Later became the American Journal of Psychiatry.
- 1852 Dr. Joseph Turner petitioned State Legislature for a Charter to establish an asylum for inebriates.  
Daniel S. Dickinson, U.S. Senator from Binghamton, turned down the nomination for President of the United States.
- 1854 The Republican Party was founded.  
Charter granted for an inebriate asylum.
- 1856 Sigmund Freud born in Freiburg, Austria.
- 1858 Lincoln and Douglas debated for a senate seat from Illinois.  
The first cigar-making business was established in Binghamton.  
City of Binghamton donated 252 acres of prime land for an inebriate asylum.  
Issac Perry was engaged as architect and was associated with the asylum for 30 years. He used Castellated Gothic with heavily buttressed turrets and towers and three imposing entrances.
- 1861 The Civil War began in America.
- 1864 15 patients out of 7245 applications admitted at \$20 a week at New York State Inebriate Asylum.
- 1865 The 13th Amendment abolished slavery. Lincoln was assassinated.
- 1866 The Atlantic Cable was completed.  
Dr. Turner was asked to resign.
- 1879 The New York State Inebriate Asylum was taken over completely by the State and became known as the Binghamton Asylum for the Chronic Insane.
- 1881 Reconstruction of Main Building completed, 300 patients admitted.
- 1882 Mc Lean Asylum Training School for nurses opened at the Mc Lean Asylum for the Insane in Massachusetts. Marked the beginning of psychiatric nursing.
- 1885 Additional buildings were built and additional properties bought for farming and husbandry.
- 1888 Swiss physician, Burckhardt, performed surgery on brain and psychotic patient to relieve symptoms.  
Dr. Armstrong urged that chronic be dropped from the name.
- 1889 Training school for attendants established.  
Bundy Manufacturing Company incorporated—forerunner of I.B.M.
- 1890 New York State Legislature passes law changing name of Asylums for the Insane to State Hospitals.  
Name changed to Binghamton State Hospital.  
Lestershire Boot and Shoe Company built in today's Johnson City.
- 1892 The first gasoline automobile was built by Duryea in Massachusetts.  
Dr. Wagner appointed Director. He introduced open wards and improved the standards of living, new industries, swimming pool.  
Adolf Meyer arrived in the United States from Zurich. Leader in mental hygiene movement, psychiatric social work, community psychiatry and psychiatric education for medical students.
- 1893 1200 patients at Binghamton State Hospital.
- 1895 Freud and Breuer publish *Studies in Hysteria*.
- 1896 New York State Psychiatric Institute established. First Psychological Clinic established by Lightner Witmer at the University of Pennsylvania. He coined the term "Clinical Psychologist."  
Spauldings began making bread in Binghamton to pay their grocery bill.
- 1900 Freud publishes *The Interpretation of Dreams*.
- 1901 Endicott Johnson builds world's largest tannery in Endicott.
- 1908 The Binghamton Public Works Department was created.  
2087 patients, Broadmoor opened one of the largest and most advanced in the state. Construction of Ferris Hall (Nurses' residence), Power Plants and Fairmount.
- 1909 Sigmund Freud makes only visit to United States to deliver series of lectures on Psychoanalysis.  
William Healy established Juvenile Psychopathic Institute in Chicago.  
Clifford Beers, an ex-mental patient and businessman, formed the National Committee for Mental Hygiene which became National Committee for Mental Health. Stressed public education and preventive measures to insure mental health.



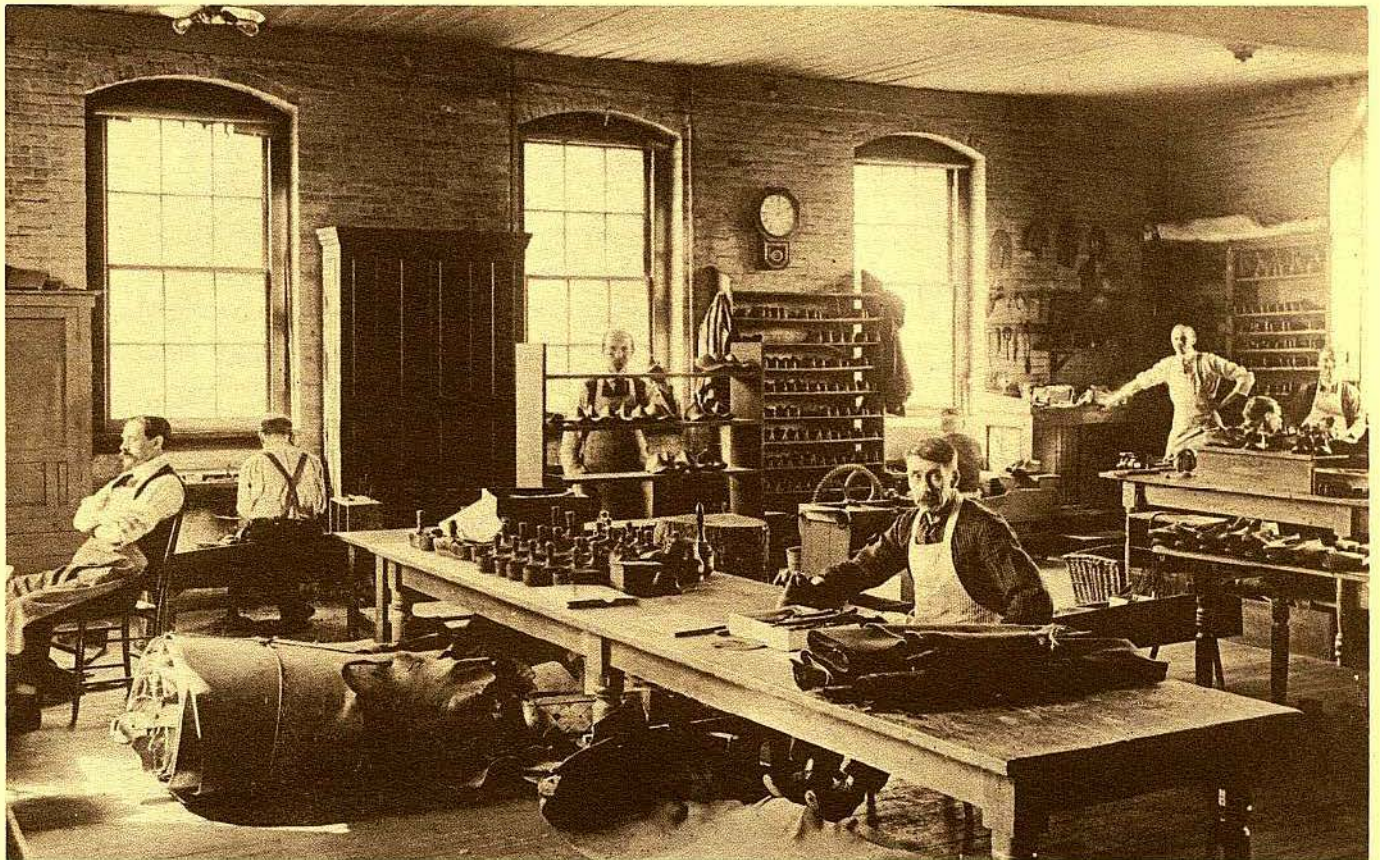


*Nursing Students - 1913*



- The National Association for the Advancement of Colored People was founded.  
Pine Camp, Summer Tent Colony, most popular and beneficial therapeutic agencies of the Hospital.
- 1917 President Wilson declared a "state of war" with Germany.  
Wagner Hall opened for 300 female residents.
- 1918 First formal training course for psychiatric social workers started at Smith College.
- 1919 Child psychology recognized as separate discipline.  
The Prohibition amendment was ratified. The country was in a depression. Harding became President.
- 1924 Dr. William Garvin, who succeeded Wagner, decentralized medical service.
- 1927 Insulin shock therapy started by Manfred Sakel at University Clinic in Vienna.  
Charles Lindberg flew the "Spirit of St. Louis" across the Atlantic.
- 1929 Herbert Hoover became President. The stock market collapsed.  
Hecox Hall, nurses' home opened.
- 1935 Egos Moniz did first frontal lobotomy in Lisbon.
- 1936 W. Freeman and J. Watts did first United States psychosurgery.  
Eight hour law was adopted.  
A great flood hit the Susquehanna Valley.
- 1938 Electroconvulsive therapy demonstrated by Cirlette and Bine.
- 1939 Freud died in London.  
World War II started.
- 1941 Japan attacked Pearl Harbor. Congress declared war on Japan.
- 1942 Thomas E. Dewey was elected governor of the state.  
Dr. Garvin died. Dr. Hugh Gregory instituted electric shock treatment.
- 1946 Mental Health Act provided funding for training of psychologists, psychiatrists and psychiatric nurses.  
Wilson Memorial took over the Endicott Johnson Medical on Clinton Street.  
Prefrontal Lobotomy performed at Binghamton State Hospital. 2917 patients.
- 1951 Chlorpromazine (Thorazine) was tested in France, first psychotropic drug.  
Electricity was generated from atomic energy for the first time.
- 1953 Mount Everest was conquered.  
The Korean Armistice was signed.  
The Garvin Building opened, total hospital population 3031.
- 1954 Chlorpromazine introduced by Smith, Kline & French to the United States.  
The Nautilus, first atomic-powered submarine, was launched by the United States.  
Racial segregation in the public schools was declared unconstitutional by the U.S. Supreme Court.
- 1955 Introduction of drug therapy at Binghamton State Hospital.
- 1957 The first man-made satellite, Sputnik I, was launched by Russia.
- 1958 Volunteer Service Department established.
- 1963 Federal Community Mental Health Center Act passed.  
President Kennedy was assassinated.  
The Watson Bridge opened between Vestal and Endicott.
- 1965 First federally funded Community Mental Health Centers opened in Florida and New York.  
Pope Paul visited the United States.  
The Watts riots in Los Angeles shocked the world.  
A power "black-out" darkened most of the northeastern United States.  
Dr. Louis Dozoretz appointed Director.
- 1969 Neil Armstrong of the United States became the first man on the moon.  
John L. Hart of Endicott was named "Outstanding Cartoonist of the Year" by the National Cartoonist Society.  
Day Center on Clinton Street opened as a day hospital and outpatient clinic.
- 1971 The 26th Amendment lowered the voting age to 18.  
Communist China was admitted to the United Nations.  
Rehabilitation Building opened.
- 1974 New York Legislature renames all State Hospitals—Psychiatric Centers. State Schools for the Retarded become Developmental Centers.  
President Nixon resigned.
- 1978 New York establishes Five-Year Mental Health Plan.
- 1981 Binghamton Psychiatric Center Centennial Year.





*Industrial Occupation – 1890's*



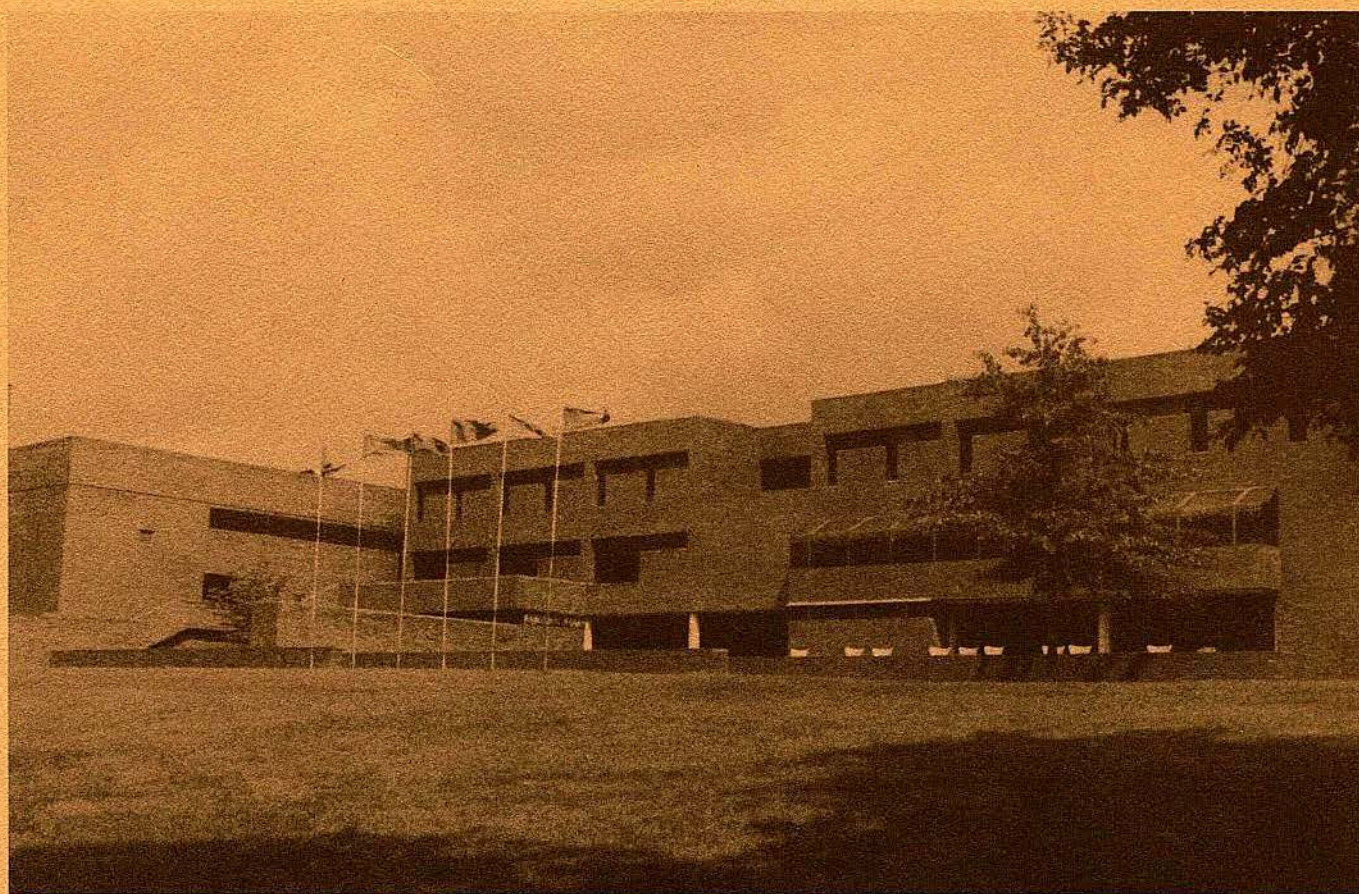


*Physical Culture Class – 1890's*





*Garvin Building*



*Rehabilitation Building*